(1)						
Applicant(s) M	mall Entity)		Docket No. LVN-08602/03			
Application No. 09/812,639	Filing Date March 20, 2001	Examiner Alexander G. Kalino	Customer wski 25006		Group Art Unit 3626	Confirmation No.
Invention: MET	THOD OF PAYMENT	FOR A HEALTHCARE	SERVICE			
		COMMISSIONER FO	OR PATENTS:			
Transmitted herew	vith is an amendment i	n the above-identified a	pplication.			
⊠ Applicant c	claims small entity state	us. See 37 CFR 1.27				
The fee has been	calculated and is trans	mitted as shown below				
		CLAIMS AS AM	IENDED			
	CLAIMS REMAINING	HIGHEST #	NUMBER EXTRA		RATE	ADDITIONAL
	AFTER AMENDMENT	PREV. PAID FOR	CLAIMS PRESENT		MIE	FEE
TOTAL CLAIMS	10 -	20 =	С	х	\$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	C	х	\$44.00	\$0.00
Multiple Dependent Claims (check if applicable)						\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$0.00
☐ Please cha☐ A check in☐ The Director	ation or credit any over	No. ir to cover the filing I to charge payment of payment to Deposit Ac	the following fees a count No. 07-118		ated with this	
		uired under 37 C.F.R. 1 ssing fees under 37 CF				
☐ Payment by	credit card. Form PT0	O-2038 is attached.				
WARNING:	Information on this	form may become pul credit card information	blic. Credit card in	form	ation should r	not be
! !!h	- hy hr		Dated:		10-2038.	
Allen M. Krass, Re Gifford, Krass, Gro & Citkowski, P.C. 280 North Old Woo Birmingham, MI 4 (248) 647-6000	oh, Sprinkle, Anderson odward - Suite 400 18009		I certify that this of United States Postal mail in an envelope a Box 1450, Alexandria	Services:	e with sufficient p sed to "Commissio 2313-1450" [37 CFI	ostage as fir st ela ss [*] ner for Patents, P.O.
	Judith J. Lange Signature of Person Mailing Correspondence					
cc:	Express Man EV602				lith T. Lange	

Typed or Printed Name of Person Mailing Correspondence



11-15-04

3626 DFW

Attorney Docket No. LVN-08602/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Michael R. Levine

Serial No.:

09/812,639

Group Art Unit: 3626

Filing Date:

March 20, 2001

Examiner: Alexander G. Kalinowski

For:

METHOD OF PAYMENT FOR A HEALTHCARE SERVICE

AMENDMENT

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed September 29, 2004, please amend the aboveidentified patent application as follows: